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# **FACSUMILE TRANSMITTAL SHEET**

DATE: April 4	, 2005		
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TO:			
NAME	/COMPANY	FACSIMILE NO	D
Examiner A.D. Be Commissioner for United States Pater		703-872-9306	☐ SUCCESSFULLY FAXED
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FROM:	Lawrence A Hoffman, I	Esq.	
OFGS FILE NO.:	IR-2316 (2-3605)-10/628,50	1 RETURN TO:	Gloria Levy
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IR-2316 (2-3605)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Yong Li et al.

Date: April 4, 2005

Scrial No.: 10/628,501

Group Art Unit: 2838

Filed: July 28, 2003

Examiner: A.D. Berhane

For: POWER TRANSFER SYSTEM WITH REDUCED COMPONENT RATINGS

VIA FACSIMILE (703) 872-9306 Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### AMENDMENT/SUBMISSION

In response to the Office Action mailed January 31, 2005, please reconsider the aboveidentified application amended as follows:

### FEE CALCULATION

\_\_ No Additional Fee is Required

Any additional fee required has been calculated as follows:

\_\_ If checked, "Small Entity" status is claimed.

NO. OF CLAIMS	PER THIS RESPONSE		PREVIO		ADD'L CLAIMS		RATE		AMOUNT DUE
TOTAL	21	MINUS	20	Ψ	1	x	(\$25 SB or \$50)	\$	50.00
INDEP.	4	MINUS	6	** =	0	х	(\$100 SE or \$200)	\$	
FIRST PRES	ENTATION OF	MULTIPL	E DEPENDI	ENT CLAI	М	х	(\$180 SE or \$360)	<b>.</b> \$	
not less that	ո 20	** not less t	than 3				TOTAL	\$	50.00

 If any additional payment is required, a check which includes the calculated fee of	)f
\$(OFGS Check No) is attached.	

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\_\_\_\_\_ Please charge the above calculated fee to our Deposit Account No. 15-0700.

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

# CONTINGENT EXTENSION REQUEST

If this communication is filed after the shortened statutory time period had elapsed and no separate Petition is enclosed, the Commissioner of Patents and Trademarks is petitioned, under 37 C.F.R. §1.136(a), to extend the time for filing a response to the outstanding Office Action by the number of months which will avoid abandonment under 37 C.F.R. §1.135. The fee under 37 C.F.R. § 1.17 should be charged to our Deposit Account No. 15-0700.

#### **AMENDMENTS**

If checked, amendment(s) to the specification are submitted herewith.
If checked, an amended abstract is submitted herewith.
✓ If checked, amendment(s) to the claims are submitted herewith.
If checked, amendment(s) to the drawings are submitted herewith.

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